

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		23	3/30/01
FORMALITY REVIEW	H-5	866	4-16-01
RESPONSE FORMALITY REVIEW	Tu	947	07/23/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	11/18/00
2	11/18/00
3	11/18/00
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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C.C.  
 04-16-01  
 10841  
 1/23/01